

## Medically Indigent Care Reporting System (MICRS)

## MICRS Snapshot

October 2001

## County Indigent Health Care Services and Expenditures Fiscal Year 1997-98

This report presents information on county indigent patients who received medical services directly provided or paid for by 24 counties<sup>1</sup> during fiscal year (FY) 1997-98. These counties reported indigent data to the California Department of Health Services (CDHS) through the Medically Indigent Care Reporting System (MICRS). Residents in these counties accounted for about nine out of every ten Californians.

The counties reported that slightly more than 1.3 million county indigents received medical services during the years FY 1997-98. This was one percent more than the number of patients reported for the previous year. Thirteen of the 24 counties showed increases in patients served, while the remaining 11 counties showed decreases. Los Angeles County, serving more than half of the county indigent patients in both years, reported a one percent decline. The 1.3 million indigents represented about one-fourth of the approximately 5 million Californians, during that year, who were both uninsured and poor (with income levels at or under 200 percent of the federal poverty level).<sup>2</sup> In general, utilization, demographic, and expenditure distributions remained similar to the previous five-year average (FYs 1992-93, 1993-94, 1994-95, 1995-96 and 1996-97) of MICRS data.

Table 1 presents the total unduplicated count of county indigent patients overall and for the four service categories. It shows that relatively few patients (53 per 1,000) were hospitalized. Most county indigents (855 per 1,000) received outpatient services, while a little more than one-fourth (270 per 1,000) received emergency department services.

**TABLE 1**  
**Numbers of County Indigent Patients,<sup>3</sup> FY 1997-98**

Patient Types	Number of Patients	Patients per 1,000
All Patients	1,317,038	-
Inpatients	69,867	53
Outpatients	1,127,111	855
Emergency Department Users	355,104	270
Other Services Users. <sup>4</sup>	14,376	11

Source: Medically Indigent Care Reporting System  
California Department of Health Services

<sup>1</sup> In FY 1997-98, 24 counties participated in the California Healthcare for Indigents Program and were required to submit reports to the CDHS through MICRS reflecting all indigent health care services they provided or paid for.

<sup>2</sup> E. Richard Brown, Center for Health Policy Research, *The State of Health Insurance in California, 1999*, January 2000. In the 1998 federal poverty guidelines published by the U.S. Department of Health and Human Services, the federal poverty level was \$8,050 for a family of one, \$10,850 for a family of two, \$13,650 for a family of three, and \$16,450 for a family of four.

<sup>3</sup> Number of patients represents the total unduplicated number of individual patients across all service categories. Table 1 has an unduplicated number of patients within each service category as well as the number of patients in each service category for every 1,000 total patients. Since some patients used more than one type of service: (1) The total number of unduplicated patients is less than the sum of the unduplicated number of patients in the four service categories, and (2) Patients per 1,000 by service category add up to more than 1,000. A small number of patients may be duplicated if they received care in multiple counties.

<sup>4</sup> Other patients include those who received the following mix of services: Skilled nursing and intermediate care services, ambulance services, and general acute care hospital inpatient services where counties paid only physicians, and not hospitals.

Total expenditures amounted to slightly more than \$1.3 billion, an increase of 12 percent over the previous year. Out of 24 counties, 19 reported increases in overall expenditures, while only five reported decreases. Los Angeles County heavily influenced the overall increase, reporting a 22 percent rise in expenditures. This represents 80 percent of the total increase. The other 23 counties reported a rise in expenditures of six percent. Los Angeles County's large increase in expenditures appears to be related to primarily two factors: (1) implementation of new data collection systems that improved the collection and processing of the data, and (2) expansion of their Public-Private Partnership program from only seven providers in FY 1996-97 to 63 in FY 1997-98. This expansion of providers resulted in both increased outpatient visits (13 percent) and expenditures (15 percent) on a statewide basis.

Table 2 shows that inpatient services accounted for the largest portion (48 percent) of the reported expenditures followed by outpatient services which comprised 41 percent of the expenditures. Expenditures for inpatient services increased by 16 percent and outpatient services expenditures increased by 15 percent over the previous year. Expenditures for Emergency department services accounted for only 10 percent of expenditures. Emergency department services expenditures increased by three percent.

**TABLE 2**  
**Expenditures for County Indigent Patients, FY 1997-98**

Service Types	Expenditures*	Percent
Inpatient	\$ 646	48%
Outpatient	\$ 558	41%
Emergency Department	\$ 127	10%
Other Services	\$ 13	1%
Total	\$1,344	100%

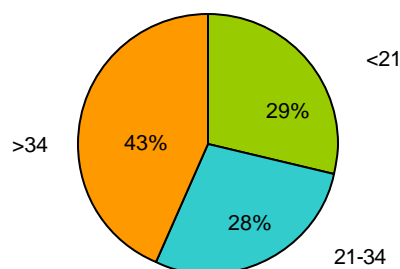
Source: Medically Indigent Care Reporting System  
California Department of Health Services

\*In millions

### Age Group Distributions

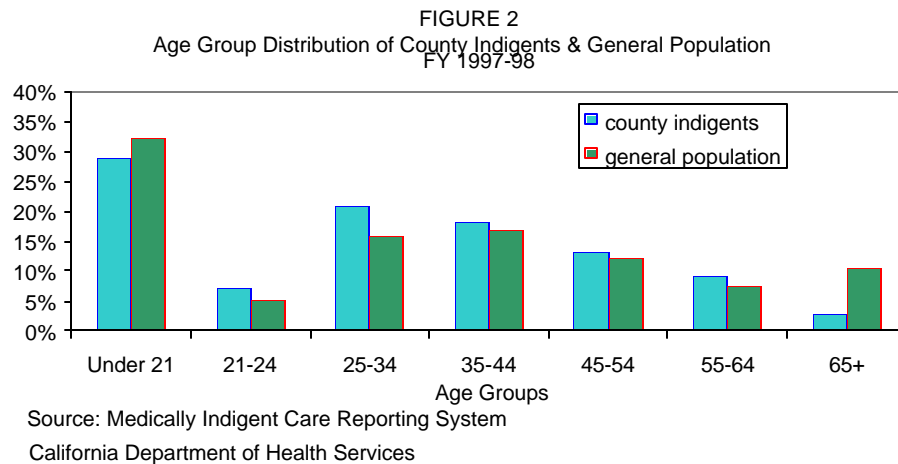
Most indigent patients are relatively young. Figure 1 shows the distribution of county indigents for three broad age categories: under 21, 21-34, and over 34. Patients under the age of 21 comprised 29 percent, while those aged 21 through 34 represented 28 percent of all county indigent patients. Fifty-seven percent of county indigent patients are age 34 or younger. Patients over 34 years of age represented the largest category – 43 percent of all county indigent patients. County indigents over 64 years are included within the over 34-age group and comprised three percent of all indigent patients.

**FIGURE 1**  
**Distribution of County Indigents by Age Group**  
**FY 1997-98**



Source: Medically Indigent Care Reporting System  
California Department of Health Services

Figure 2 compares the age distributions of the general population and county indigents. Compared to the general population of the reporting counties, county indigents are shown to be underrepresented among those over 64 years of age. Adults age 64 and older are underrepresented since they are eligible to receive healthcare services through the Medicare program. Also, underrepresented are those in the under-21 age group, as they are eligible for healthcare services through Medi-Cal. Conversely, indigents in the remaining age groups were overrepresented – particularly those aged 25-34 years. Compared to older adults, younger adults are more likely to have incomes below the poverty level. This makes them more likely to be uninsured and less likely to have job-based insurance or to be able to pay for their health care.



## Race/Ethnicity

Figure 3 compares the distributions of population and patients for six ethnic categories. Hispanics were the largest ethnic group, making up 52 percent of county indigent patients. The next largest group, Whites, composed twenty-two percent, while Blacks represented 13 percent and Asian/Pacific Islanders accounted for 6 percent of the total. As Figure 3 shows, compared to the general population, Hispanics and Blacks were overrepresented, while Whites and Asian/Pacific Islanders were underrepresented. As a combined group, Native Americans, Eskimos and Aleutians comprised less than one percent of the county indigents, which was similar to their distribution in the general population. Discrepancies appear to be related to variations in insurance and income levels. For example, one study showed that a greater proportion of Latino and Black persons lacked job-based health insurance and had lower income levels. This study revealed that as incomes increased for Black persons, the availability of job-based health insurance also increased.<sup>5</sup> Only 41 percent of Latinos and 55 percent of Blacks were estimated to have job-based health insurance, compared to 69 percent of Whites in 1997.<sup>6</sup> Overall, Whites had the highest percentage of health insurance coverage from all sources at 85 percent, Blacks at 79 percent, and Asians at 76 percent.<sup>7</sup> In contrast, Latinos had the lowest rates of health insurance coverage from all sources at 64 percent.<sup>8</sup>

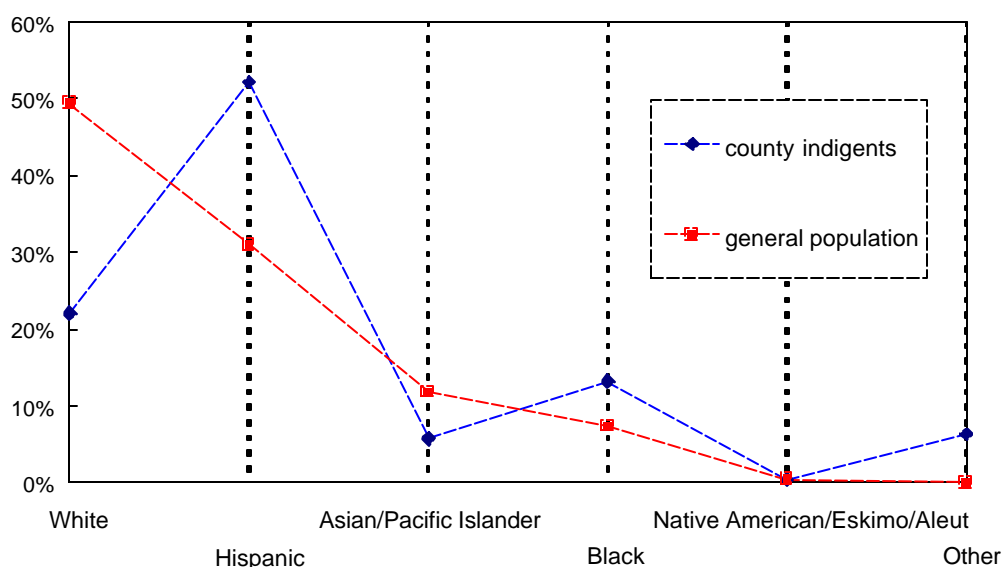
<sup>5</sup> E. Richard Brown, Center for Health Policy Research, *African Americans Remain Uninsured at Higher Rates than Whites Despite Their Increasing Job-Based Coverage*, April 1999.

<sup>6</sup> E. Richard Brown, Center for Health Policy Research, *African Americans Remain Uninsured at Higher Rates than Whites Despite Their Increasing Job-Based Coverage*, April 1999.

<sup>7</sup> E. Richard Brown, Center for Health Policy Research, *Declining Medi-Cal Coverage Leads To Increasing Uninsured Rate among California's Asian Americans and Pacific Islanders*, April 1999.

<sup>8</sup> E. Richard Brown, Center for Health Policy Research, *Disparity in Job-Based Health Coverage Places California's Latinos at Risk of Being Uninsured*, April 1999.

**FIGURE 3**  
**Distribution of County Indigents and General Population by Race/Ethnicity**  
**FY 1997-98**



Source: Medically Indigent Care Reporting System Unit  
California Department of Health Services

## Utilization Highlights

An overview of county indigents' utilization of three major types of services reported for FY 1997-98 is shown below:

### Inpatient Services

- The overall average expenditure<sup>9</sup> per inpatient day was \$1,585 and \$7,449 per discharge. The average number of discharges per inpatient was 1.2 (86,847 discharges).
- The average length of stay was 4.7 days (408,202 days).
- Mental disorders accounted for the lowest expenditures per day (\$935).
- Expenditures per inpatient day were highest for the following categories:
  - ◆ Circulatory System..... \$1,857 (12 percent of days);
  - ◆ Congenital Anomalies..... \$1,802 (<1 percent of days);
  - ◆ Conditions Originating in the Perinatal Period.... \$1,801 (<1 percent of days);
  - ◆ Injuries & Poisonings..... \$1,789 (17 percent of days).
- Injuries and Poisonings (17 percent), Digestive Disorders (15 percent), and Circulatory Diseases (14 percent) were the most frequent discharge diagnoses, accounting for 46 percent of all the reported discharges.
- Patients with Infectious & Parasitic Diseases (6 percent of days) had the longest average lengths of stay (6.9 days), while Symptoms, Signs and Ill-Defined Conditions produced the shortest stays (2.3 days) and accounted for three percent of days.
- 58 percent of the inpatients were males.
- 45 percent of the inpatients were aged 25 to 44 years.

### Outpatient Services

- The average number of visits per outpatient was 2.8 (3.2 million visits).
- The overall average expenditure per outpatient, including ambulatory surgeries, was \$495.
- Females accounted for 55 percent of the outpatients and 56 percent of the outpatient visits.

<sup>9</sup> Expenditure data represent county costs or payments, not charges. Where services were provided, but not reimbursed by counties, associated data are not reportable.

## **Emergency Department**

- Males accounted for 55 percent of the emergency department patients, 56 percent of the emergency department visits, and 55 percent of the emergency department expenditures.
- The average number of emergency department visits, per emergency department patient, was 1.6 (570,116 visits).
- The average expenditure per emergency department visit was \$223 and \$357 per emergency department patient.

## **Summary**

Twenty-four counties reported spending \$1.3 billion on healthcare services for 1.3 million indigents during FY 1997-98. Fifty-seven percent of the patients were under 35 years of age. Hispanics (49 percent) and Whites (21 percent) represented the two largest race/ethnic groups. Females accounted for a slight majority of all patients, though males accounted for the majority of inpatients and emergency department patients. Compared to FY 1996-97, expenditures increased by 12 percent and the number of patients increased by one percent. This reflected increased expenditures in more than three-fourths of the 24 counties, including Los Angeles County that reported a 22 percent increase. Utilization patterns remained comparable to the past five-year average of MICRS data.

**This MICRS Snapshot was prepared by the Medically Indigent Care Reporting System Unit, Office of County Health Services, Department of Health Services located at:**

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